



STATE OF TENNESSEE
DEPARTMENT OF COMMERCE AND INSURANCE
BOARD OF FUNERAL DIRECTORS AND EMBALMERS
500 JAMES ROBERTSON PARKWAY, SECOND FLOOR
NASHVILLE, TN 37243-1144
Office: 615-741-5062; Fax: 615-532-1903
www.state.tn.us/commerce

CERTIFICATION OF COMPLETION OF APPRENTICESHIP

I, _____ a duly licensed funeral director
(Please print or type)
an/or embalmer for the State of Tennessee, hereby certify that _____
(Please print or type)
began serving his () her () apprenticeship as (Funeral Director) and/or (Embalmer) under me,
on the _____ day of _____, 20 _____.

I further certify that the above named apprentice worked at least 40 hours per week for a regular
salary in the _____ Funeral Home where I was practicing
as funeral director an/or embalmer and that he/she said apprentice worked under my personal
supervision until the _____ day of _____, 20 _____.

Signature _____

License #'s: FD _____ EMB _____

STATE OF TENNESSEE
COUNTY OF _____

Personally appeared before me the Licensee named above who makes oath that the information's
contained herein is true and correct to the best of his or her knowledge and belief this the _____ day
of _____, 20 _____.

(SEAL)

NOTARY PUBLIC _____

My Commission Expires: _____